

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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PATENT	B
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In rethe application of)	
Dahaut I Smith) Examiner: Hung T. Nguyen	
Robert J. Smith)) Art Unit: 2636	
Serial No: 10/792,048)	
) Attorney Docket: FSI-1	
Filed: March 3, 2004) Deter Terrer 10, 2007	
For: REMOTE SENSING AND SIGNALD PRESENCE OF WILDFIRE) Date: January 19, 2006 OF THE))	
CERTIFICATE OF MAILING I hereby certify that this co an envelope addressed to: Commissioner of Patents, P.O. E	ondence is being deposited with the United States Postal Service as First Class Mail in 450, Alexandria, VA 22313-1450 on January 19, 2005 Signed:	
Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450	Say R Beyer	
SIR: Transmitted herewith is an Amendment for	e above application.	
X Small entity status of this application No additional fee is required. X Postcard included	der 37 C.F.R. §§ 1.9 and 1.27 has been established	
The fee has been calculated as shown below:		
(Col. 1) (Col. 2	(Col. 3) SMALL ENTITY NON- SMALL ENTITY	
Claims Previou Remaining Paid Fo	Present Extra Rate Additional Fee Fee Rate Additional Fee	
Total Claims * 36 Minus **47	0 x 25 \$ 0 x 50 \$	
Indep. Claims * 5 Minus ***12	0 x 100 \$ 0 x 200 \$	
First Presentation of Multiple Dependent Cla		
* If the entry in Col. 1 is less than the entry In Col. 2, write "0" in Col. 3. Total \$ 0 Total \$ \\$ ** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.		
*** If the "Highest No. Previously Paid For" IN THIS S (Total or Independent) is the highest number found originally filed.	CE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" in the equivalent box in Col. 1 of a prior amendment or the number of claims	
	stension of Time of month(s) pursuant to 37 C.F.R. § 1.136(a).	
X Enclosed please find PTO form PTO-2038 authorizing credit card payment of <u>\$ 180</u> to cover the Information		
Disclosure Statement fee.		
X The Commissioner is hereby authorized to charge payment of the following fees associated with this		
communication or credit any overpa	to charge payment of the following fees associated with this nt to Deposit Account No. 19-1685 (Order No. FSI-1) (a duplicate	
communication or credit any overpation copy of this sheet is enclosed):	nt to Deposit Account No. 19-1685 (Order No. FSI-1) (a duplicate	
communication or credit any overpartice copy of this sheet is enclosed): X Any additional fees ass		

Jay R Beyer

Registration No. 39,907

Respectfully submitted.